### Case 16-80372 Doc 1 Filed 02/19/16 Entered 02/19/16 13:31:44 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Tracy	
	your government-issued picture identification (for example, your driver's	First name	First name
		Allen	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Hollin	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	xxx-xx-9097	
	(ITIN)		

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Debtor 1 Tracy Allen Hollin

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names an Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs				
5.	Where you live	1725 Hancock Street	If Debtor 2 lives at a different address:				
		Rockford, IL 61103  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Winnebago County	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Case number (if known) Debtor 1 Tracy Allen Hollin

7. The chapter of the Bankruptcy Code you are choosing to file under  Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individual (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7						
	cnoosing to file under	■ Ch	apter 7			
		☐ Ch	apter 11			
		☐ Ch	apter 12			
		☐ Ch	apter 13			
8.	How you will pay the fee		about how yo	u may pay. Typica attorney is submit	ally, if you are paying the fee yo	ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
						on, sign and attach the Application for Individuals to Pay
			•	`	Official Form 103A).	n only if you are filing for Chapter 7. By law, a judge may,
		I	but is not req that applies t	uired to, waive yo o your family size	ur fee, and may do so only if yo and you are unable to pay the t	our income is less than 150% of the official poverty line fee in installments). If you choose this option, you must fill Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	■ No.	•			
			District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your	■ No.	Go to I	ine 12.		
	residence?	☐ Yes	s. Has yo	ur landlord obtain	ed an eviction judgment agains	t you and do you want to stay in your residence?
				No. Go to line 12		
				Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with this

Deb	otor 1 _Tracy Allen Hollin			Document	Page 4 of 55	Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, State & ZIP	Code		
	it to this petition.		Chec	k the appropriate box to des	-		
				Health Care Business (as	defined in 11 U.S.C.	§ 101(27A))	
				Single Asset Real Estate	(as defined in 11 U.S.	C. § 101(51B))	
				Stockbroker (as defined in	n 11 U.S.C. § 101(53 <i>A</i>	·))	
				Commodity Broker (as de	fined in 11 U.S.C. § 1	01(6))	
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, s operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am r	not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		l am NOT a small bus	iness debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter 11 and I	l am a small business	debtor according to the definition in the Bankruptcy Code	
Par	t 4: Report if You Own or	Have Any	y Hazardo	ous Property or Any Prope	rty That Needs Imme	ediate Attention	
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to public health or safety?	□ res.	What is	the hazard?			
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?			

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

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Debtor 1 Tracy Allen Hollin

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	briefing about credit
counseling because of:	

I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Tracy Allen Hollin** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 **1**-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tracy Allen Hollin Signature of Debtor 2 **Tracy Allen Hollin** Signature of Debtor 1 Executed on February 19, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Tracy Allen Hollin Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel /	A. Springer	Date	February 19, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name			
Springer L	aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & St	ate		

		Docume	ent Page 8 of 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tracy Allen Hollin	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	38,620.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,384.46
	1c. Copy line 63, Total of all property on Schedule A/B	\$	42,004.46
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	6,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	305,540.00
	Your total liabilities	\$	311,540.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,780.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,726.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	o noroona	al family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$_	3,707.04

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ \$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fill i	n this inforr	nation to identify	y your case and	this filin	g:					
Debt	or 1	Tracy Allen	Hollin							
Debt	or 2 se, if filing)	First Name		ile Name		Last Name				
Unite	ed States Ba	nkruptcy Court fo	r the: NORTHE	RN DIST	RICT OF ILLIN	IOIS				
Case	e number _					-			☐ Check if amende	this is and filing
Offi	icial Fo	rm 106A/E	3							
3c	hedul	e A/B: Pi	roperty							12/15
fits b	best. Be as co space is need	omplete and accura led, attach a separa	ate as possible. If to te sheet to this for	wo marrie m. On the	d people are fili top of any addi	asset fits in more than on ng together, both are equational pages, write your na or Have an Interest In	ally responsible	for supplying	correct informa	ation. If
	Yes. Where is	s the property?		•••						
1.1	1725 Hand	cock Street		What		? Check all that apply.				
-	1725 Hancock Street Street address, if available, or other description		_ <b>=</b>	amount of		uct secured cla iny secured cla I/ho Have Clair	e D:			
_	Rockford	IL	61103-0000		Land	or mobile home	Current val	erty?	Current value portion you o	own?
	City	State	ZIP Code		Investment pro Timeshare Other	perty		7,240.00	ადი	8,620.00 interest
				Who one.	has an interest	in the property? Check		e simple, tena e), if known.	ancy by the enti	reties, or
				-	Debtor 1 only		Joint ter	ant		
_	Winnebag	0			,					
	County				Debtor 1 and D At least one of	Debtor 2 only the debtors and another		if this is com nstructions)	munity property	у
				Other	r information yo	u wish to add about this it	em, such as loc	al		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$38,620.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

property identification number:

mortgage for \$87,000 on it.

Debtor is on the Deed, but not on the Mortgage. Real Estate has a

Official Form 106A/B Schedule A/B: Property page 1

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6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Yes. Describe.....

1 King Bed, 2 Dressers

\$110.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

**Desktop Computer, 2 TV's** 

\$300.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

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Official Form 106A/B

Schedule A/B: Property

**PNC Bank** 

\$7.55

17.2. Checking

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Case number (if known)

Document Debtor 1 **Tracy Allen Hollin** 

	17.	3. Checking	PNC Bank	\$20.00
18	Bonds, mutual funds, or pu Examples: Bond funds, inves		kerage firms, money market accounts	
	■ No □ Yes	Institution or issuer n	ame:	
19	and joint venture	nd interests in incorpo	rated and unincorporated businesses, including an interest	in an LLC, partnership,
	<ul><li>■ No</li><li>□ Yes. Give specific informat</li></ul>	ion about them	% of ownership:	
20	Negotiable instruments include	de personal checks, cash are those you cannot trar	tiable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
21	. Retirement or pension acco		03(b), thrift savings accounts, or other pension or profit-sharing p	lans
	,	arately. oe of account: <b>1(k)</b>	Institution name: Thrift	Unknown
22		osits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compani	es, or others
	☐ Yes		Institution name or individual:	
23	■ No	eriodic payment of mone ame and description.	y to you, either for life or for a number of years)	
24		A, in an account in a qu	nalified ABLE program, or under a qualified state tuition prog	ıram.
	■ No □ Yes Institution	on name and description	. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	Trusts, equitable or future in  No  Yes. Give specific informat		her than anything listed in line 1), and rights or powers exer	cisable for your benefit
26	Patents, copyrights, tradem	arks, trade secrets, and	d other intellectual property ds from royalties and licensing agreements	
	■ No □ Yes. Give specific informat			
27	Licenses, franchises, and o  Examples: Building permits, o  ■ No		<b>s</b> erative association holdings, liquor licenses, professional license	s
	☐ Yes. Give specific informat	ion about them		
M	oney or property owed to you	?		Current value of the portion you own?  Do not deduct secured

Official Form 106A/B

claims or exemptions.

De	btor 1	Tracy Allen Hollin	Document	Page 14 of 55  Case number (if known)	
28.	Tax ref	unds owed to you			
	■ No	•			
	☐ Yes. (	Give specific information about then	n, including whether you alro	eady filed the returns and the tax years	
		support bles: Past due or lump sum alimony,	spousal support, child supp	port, maintenance, divorce settlement, property	settlement
		Give specific information			
		amounts someone owes you oles: Unpaid wages, disability insura benefits; unpaid loans you mad		nefits, sick pay, vacation pay, workers' compe	nsation, Social Security
		Give specific information			
		ts in insurance policies bles: Health, disability, or life insuran	ce; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes. I	Name the insurance company of ea Company nar		Beneficiary:	Surrender or refund value:
	If you a	erest in property that is due you fare the beneficiary of a living trust, ene has died.		ed nsurance policy, or are currently entitled to reco	eive property because
		Give specific information			
		against third parties, whether or oles: Accidents, employment dispute		uit or made a demand for payment ts to sue	
	_	Describe each claim			
	Other o	contingent and unliquidated claim	s of every nature, including	ng counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim			
	Any fina  No	ancial assets you did not already	list		
		Give specific information			
36		•	,	any entries for pages you have attached	\$69.46
Pai	rt 5: Des	scribe Any Business-Related Property	You Own or Have an Interest I	n. List any real estate in Part 1.	
_	_ ′	wn or have any legal or equitable inter	est in any business-related pro	operty?	
_	■ No. Go TYes G	to Part 6. to to line 38.			
_		<b>.</b>			
Pai		scribe Any Farm- and Commercial Fish ou own or have an interest in farmland, lis		n or Have an Interest In.	
46.		own or have any legal or equitab	le interest in any farm- or	commercial fishing-related property?	
	☐ Yes.	Go to line 47.			

Current value of the portion you own?
Do not deduct secured claims or exemptions. page 5

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Case number (if known) Document Debtor 1 **Tracy Allen Hollin** 

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$38,620.00 56. Part 2: Total vehicles, line 5 \$2,825.00 57. Part 3: Total personal and household items, line 15 \$490.00 58. Part 4: Total financial assets, line 36 \$69.46 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$3,384.46 Copy personal property total \$3,384.46 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$42,004.46

Official Form 106A/B

			111 1 1000: 10 01 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tracy Allen Hollir	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property	You Claim as Exem	pt

1.	Which set of exemptions	re you claiming? Check one of	only, even if your s	pouse is filing with you
----	-------------------------	-------------------------------	----------------------	--------------------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
1725 Hancock Street Rockford, IL 61103 Winnebago County Debtor is on the Deed, but not on the Mortgage. Real Estate has a mortgage for \$87,000 on it. Line from <i>Schedule A/B</i> : 1.1	\$77,240.00	\$15,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
<b>1994 Ford F250 200,000 miles</b> Line from <i>Schedule A/B</i> : <b>3.2</b>	\$500.00	\$2,400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
1 King Bed, 2 Dressers Line from Schedule A/B: 6.1	\$110.00	\$110.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Desktop Computer, 2 TV's Line from Schedule A/B: 7.1	\$300.00	\$300.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Used Clothing Line from Schedule A/B: 11.1	\$80.00	\$80.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)

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Debtor 1 Tracy Allen Hollin Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
	Zine ironi concadic 705. 1611			100% of fair market value, up to any applicable statutory limit	
	Savings: PNC Bank Line from Schedule A/B: 17.1	\$11.91		\$6.00	735 ILCS 5/12-1001(b)
	Ellie Holli Goriodale 775. TTT			100% of fair market value, up to any applicable statutory limit	
	Checking: PNC Bank Line from Schedule A/B: 17.3	\$20.00		\$100.00	735 ILCS 5/12-1001(b)
	Elle Holli Genedale 7/2. 11.0			100% of fair market value, up to any applicable statutory limit	
	401(k): Thrift Line from Schedule A/B: 21.1	Unknown		100%	735 ILCS 5/12-1006
	Line Holli Schedule A.B. 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every			iled on or after the date of adjustme	ent.)
	☐ Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	e?
	□ No				
	☐ Yes				

Case	10 00072	Document Document	Page 18	of 55		viairi
Fill in this information	on to identify you					
Debtor 1 <b>T</b>	racy Allen Holli	n				
	irst Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) Fi	irst Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:	NORTHERN DISTRICT OF ILLI	INOIS			
Case number					□ Chec'	k if this is an
,					· -	ided filing
					_	ŭ
Official Form 1	-					
Schedule D:	Creditors	Who Have Claims S	Secured	by Property	y	12/15
Be as complete and accu	urate as possible. If	two married people are filing together,	. both are equall	v responsible for supp	olving correct informati	on. If more space is
needed, copy the Addition		number the entries, and attach it to thi				
known).	alaima anamad buu					
. Do any creditors have		• • •	aabadulaa Va	u hava nathing alaa t	to ronart on this form	
_		is form to the court with your other	scriedules. 10	u nave notning else t	o report on this form.	
Yes. Fill in all o	of the information b	pelow.				
Part 1: List All Se	cured Claims			Column A	Column B	Column C
		ore than one secured claim, list the credit				
		rticular claim, list the other creditors in Paraccording to the creditor's name.	art 2. As much	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
O. 4 Cront Bork A		Describe the preparity that seemed the	a alaim.	value of collateral.	claim	If any
2.1 Grant Park Au Creditor's Name		Describe the property that secures the 2006 Ford Fusion 160,000 miles		\$6,000.00	\$2,325.00	\$3,675.00
Greatier e Hame		2006 Ford Fusion 160,000 iiii	lies			
Attn: Bankrup	otcy Dept.					
908 Broadway	y	As of the date you file, the claim is: Clapply.	heck all that			
Rockford, IL (	61104	Contingent				
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as m	ortgage or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debtor :		☐ Statutory lien (such as tax lien, mech	nanic's lien)			
At least one of the de		Judgment lien from a lawsuit				
☐ Check if this claim r community debt	elates to a	☐ Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account number	⊇r			
Date dest was meaned		Luci 4 digite oi docum numbe				
Add the dollar value of	of your entries in Col	umn A on this page. Write that numbe	er here:	\$6,00	0.00	
If this is the last page Write that number her	•	e dollar value totals from all pages.		\$6,00	0.00	
		a Debt That You Already Listed				
		notified about your bankruptcy for a d				
		meone else, list the creditor in Part 1, in Part 1, list the additional creditors h				
do not fill out or submit	this page.		•	, , ,		,
Name Addres	SS	_				_
-NONE-		Or	n which line	ın Part 1 did vou	enter the creditor	?

Official Form 106D

Last 4 digits of account number

			Do	cument	Page 19 of 55			
Fill in	this informa	ation to identify your	case:					
Debto	r 1	Tracy Allen Hollin	1					
		First Name	Middle Name		Last Name			
Debtoi (Spouse		First Name	Middle Name		Last Name			
(Spouse	ii, iiiiig)	i iist ivaille						
United	l States Bank	ruptcy Court for the:	NORTHERN DI	STRICT OF IL	LLINOIS			
Case r	number							
(if knowr							Check if th	nis is an
							amended	filing
Offic	ial Form	106E/F						
			Wha Hava	Unagai	red Claima			
		/F: Creditors			IFEO CIAIMS Y claims and Part 2 for creditors with NO			12/15
Part 1 1. Part 2 3.	tinuation Page (if known).  List All e  Do any credit  No. Go to l  Yes.  List All e  No. You ha  Yes.  List all of you unsecured cla	e to this page. If you have of Your PRIORITY Ur ors have priority unsecu- Part 2.  of Your NONPRIORIT ors have nonpriority unsecured ave nothing to report in this or nonpriority unsecured im, list the creditor separa	e no information to assecured Claims against TY Unsecured Claims against secured claims aga	you?  ims  nst you?  m to the court volution of the court	with your other schedules.  If the creditor who holds each claim. If a credit dentify what type of claim it is. Do not library and have more than three nonpriority unsecur	editor has mor	es, write your  e than one nor dy included in ut the Continua	npriority Part 1. If more attion Page of
							Total cla	
4.1	-	Bank Delaware	Last 4	digits of accor	unt number		\$	1,319.00
	Attn: Ban PO Box 8	reditor's Name kruptcy Dept. 803 on, DE 19899	When	was the debt i	ncurred?			
	<del></del>	et City State Zlp Code	As of	the date you fil	e, the claim is: Check all that apply			
	Who incurre	ed the debt? Check one.	Пс	ntingent				
	Debtor 1	only	<b>_</b> C0	mingoni				
	Debtor 2	•	☐ Un	liquidated				
		•		•				
		and Debtor 2 only	☐ Dis		TY unsecured claim:			
		ne of the debtors and and			T discoured ciain.			
	debt	this claim is for a comn	nunity 🗀 St.	ident loans				
	Is the claim	subject to offset?		ligations arising port as priority cl	out of a separation agreement or divorce that	at you did		
	■ No		☐ De	bts to pension o	r profit-sharing plans, and other similar debt	3		
	☐ Yes		■ Oth	ner. Specify	Credit Card Purchases			
4.2	Best Care	e Emergency Phys	icians Last 4	digits of accor	int number		\$	1,995.00
	Nonpriority C	reditor's Name		_			Ψ	,
	12167 119	HWY 10 N Suite 1	085 When	was the debt in	ncurred?			

Clearwater, FL 33764

Number Street City State Zlp Code

As of the date you file, the claim is: Check all that apply

Debtor	Case 16-80372 Doc 1  Tracy Allen Hollin	Filed 02/19/16 Document	Entered 02/19/16 13:31:44 Page 20 of 55 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.	Пол			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORIT	f unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising on not report as priority cla	out of a separation agreement or divorce that you did ims		
	■ No	Debts to pension or	profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Medical Bills		
4.3	Capital One Bank USA NA	Last 4 digits of accoun	nt number	\$	674.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt in		· · · · · · · · · · · · · · · · · · ·	
	PO Box 30281 Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file	, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY	/ unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising on ot report as priority cla	out of a separation agreement or divorce that you did ims		
	■ No	Debts to pension or	profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Credit Card Purchases		
4.4	Capital One Bank USA NA	Last 4 digits of accou	nt number	\$	940.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281	When was the debt in	curred?		
	Salt Lake City, UT 84130  Number Street City State Zlp Code	As of the date you file	, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY	f unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising on not report as priority cla	out of a separation agreement or divorce that you did ims		
	■ No	Debts to pension or	profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Credit Card Purchases		
4.5	Canital One Bank USA NA	Look A digito of accoun		· ·	3.259.00

Nonpriority Creditor's Name

Case 16-80372 Doc 1 Filed 02/19/16 Entered 02/19/16 13:31:44 Desc Main Document Page 21 of 55 Debtor 1 Tracy Allen Hollin Case number (if know) Attn: Bankruptcy Dept. When was the debt incurred? PO Box 30281 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset?  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card Purchases** Other. Specify 4.6 Chase Bank USA 831.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset?  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card Purchases** Other, Specify 4.7 1,714.00 **Credit First NA** Last 4 digits of account number \$

Nonpriority Creditor's Name	When was the debt in	icurred?	
Cleveland, OH 44181			
Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only			
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:	
☐ Check if this claim is for a community lebt	☐ Student loans		
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	Debts to pension o	r profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	Credit Card Purchases	

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Debtor	1 Tracy Allen Hollin	Case number (if know)		
4.8	Credit One Bank NA	Last 4 digits of account number	\$	1,739.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 98872	When was the debt incurred?	·	
	Las Vegas, NV 89193  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
		As of the date you me, the damnis. Oneon an that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card Purchases	_	
4.9	HSBC Bank	Last 4 digits of account number	\$	811.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 9	When was the debt incurred?		
	Buffalo, NY 14240 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	·		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit Card Purchases		
4.10	Osceola County EMS	Last 4 digits of account number	\$	536.00
	Nonpriority Creditor's Name 2586 Partin Settlement Road Kissimmee, FL 34744	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

Debtor	Case 16-80372 Doc 1  Tracy Allen Hollin	Filed 02/19/16 Entered 02/19/16 13:31:44  Document Page 23 of 55  Case number (if know)	Desc Main
	Who incurred the debt? Check one.	Политический	
	■ Debtor 1 only	Contingent	
	Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
4.11	Osceola Regional Medical		
	Center	Last 4 digits of account number	\$ 280,000.00
	Nonpriority Creditor's Name 700 West Oak Street Kissimmee, FL 34741	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	•	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.12	OSF St. Anthony Med Center	Last 4 digits of account number	\$ 3,268.00
	Nonpriority Creditor's Name	When was the debt incurred?	Ψ
	Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only		
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\Box$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify  Medical Bills	
4.13	Physicians Immediate Care	Last 4 digits of account number	\$ 171.00
	Nonpriority Creditor's Name PO Box 8798 Carol Stream, IL 60197	When was the debt incurred?	

Debtor	Case 16-80372 Doc 1	Filed 02/19/16 Document	Entered 02/19/16 13:31:44 Page 24 of 55 Case number (if know)	Desc Main	
	Number Street City State Zlp Code	As of the date you file,	the claim is: Check all that apply		
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising o	out of a separation agreement or divorce that you did		
	■ No	Debts to pension or	profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Medical Bills		
1.14	Rockford Health Physicians	Last 4 digits of accour	nt number	\$	272.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2300 N Rockton Ave.	When was the debt inc	curred?		
	Rockford, IL 61103  Number Street City State Zlp Code	As of the date you file,	the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising on ot report as priority claim	out of a separation agreement or divorce that you did ims		
	■ No	☐ Debts to pension or	profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Medical Bills		
4.15	SYNCB/JC Penney	Last 4 digits of accour	nt number	\$	169.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965007	When was the debt inc	curred?		
	Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file,	the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	_			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising on ot report as priority claim	out of a separation agreement or divorce that you did ims		
	■ No	☐ Debts to pension or	profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Credit Card Purchases		
4.16	Syncb/Paypalsmartconn	Last 4 digits of accour	nt number	\$	299.00

Nonpriority Creditor's Name

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Case number (if know) Document Debtor 1 Tracy Allen Hollin

	PO Box 965024 Orlando, FL 32896 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply		
	PO Box 965024 Orlando, FL 32896			
	PO Box 965024	when was the debt incurred?		
	Attn: Bankruptcy Dept.			
	Nonpriority Creditor's Name		Ψ	
4.18	SYNCB/Wal-Mart	Last 4 digits of account number	\$	661.00
	Yes	■ Other. Specify Credit Card Purchases		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check if this claim is for a community debt	☐ Student loans		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 only	☐ Contingent		
	Who incurred the debt? Check one.	☐ Contingent		
	PO Box 965005 Orlando, FL 32896 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply		
	Nonpriority Creditor's Name		Ψ	,
4.17	Syncb/Sams Club	Last 4 digits of account number	\$	4,870.00
	Yes	Other. Specify  Credit Card Purchases		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check if this claim is for a community debt	☐ Student loans		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 only			
	Who incurred the debt? Check one.	☐ Contingent		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	PO Box 965005 Orlando, FL 32896	When was the debt incurred?		

Webbnk/FSTR

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Case number (if know)

Nonpriority Creditor's Name Attn: Bankruptcy Dept. 6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incu	urred?							
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply								
Who incurred the debt? Check one.	☐ Contingent								
Debtor 1 only	<b>3</b>								
Debtor 2 only	☐ Unliquidated								
☐ Debtor 1 and Debtor 2 only	☐ Disputed								
☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:							
☐ Check if this claim is for a community debt	☐ Student loans								
Is the claim subject to offset?	Obligations arising ou	it of a separation agreement or divorce that you did							
■ No	_ ` ` ` `	rofit-sharing plans, and other similar debts							
Yes	Other. Specify	Credit Card Purchases							
World Finance Corp	Last 4 digits of account	number	\$	194.00					
Nonpriority Creditor's Name Att: Bankruptcy Dept. 5301 E State St. STE 109	When was the debt inco	urred?							
Rockford, IL 61108  Number Street City State Zlp Code	As of the date you file,	the claim is: Check all that apply							
Who incurred the debt? Check one.	☐ Contingent								
Debtor 1 only	cogo								
☐ Debtor 2 only	☐ Unliquidated								
Debtor 1 and Debtor 2 only	☐ Disputed	d eleter							
At least one of the debtors and another	Type of NONPRIORITY	unsecureu ciaim.							
☐ Check if this claim is for a community debt	☐ Student loans								
Is the claim subject to offset?	☐ Obligations arising ou not report as priority claim	at of a separation agreement or divorce that you did							
■ No	Debts to pension or p	rofit-sharing plans, and other similar debts							
☐ Yes	Other. Specify	Payday Loan							
3: List Others to Be Notified About a D	eht That You Already Lis	ted.							
e this page only if you have others to be notified ing to collect from you for a debt you owe to som	about your bankruptcy, for a neone else, list the original co listed in Parts 1 or 2, list the	debt that you already listed in Parts 1 or 2. For example that you already listed in Parts 1 or 2. For example additional creditors here. If you do not have additional creditors here.	here. Similar	ly, if you have					
ne and Address t & Gaines PC	On which entry in Par Line <u>4.3</u> of ( <i>Check one</i> )	t 1 or Part2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Ur		Claims					
Glenn Ave eeling, IL 60090		■ Part 2: Creditors with Nonpriority	y Unsecure	ed Claims					
<del>-</del> -	Last 4 digits of account	nt number							
ne and Address valry Portfolio Services Summit Lake Drive, Suite 400 malla, NY 10595	On which entry in Par Line <u>4.9</u> of ( <i>Check one</i>	t 1 or Part2 did you list the original creditor?  Description: □ Part 1: Creditors with Priority Ur  Part 2: Creditors with Nonpriority	secured C						
iana, iti 10000	Last 4 digits of accoun	nt number							
ne and Address nmonwealth Financial n: Bankruptcy Dept. Main St.	On which entry in Par Line <u>4.2</u> of ( <i>Check one</i>	t 1 or Part2 did you list the original creditor?  □ Part 1: Creditors with Priority Ur  ■ Part 2: Creditors with Nonpriority	secured C						

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Case number (if know) Debtor 1 Tracy Allen Hollin Scranton, PA 18519 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Convergent Healthcare Inc. Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 121 NE Jefferson St. Suite 100 **Peoria, IL 61602** Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Creditors Protection Service** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 4115 Rockford, IL 61101 Last 4 digits of account number On which entry in Part 1 or Part2 did you list the original creditor? Name and Address **Equifax** Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740256 ■ Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30374 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Experian** Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4500 ■ Part 2: Creditors with Nonpriority Unsecured Claims Allen, TX 75013 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **LVNV** Funding Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 10497 Greenville, SC 29603 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Midland Funding, LLC Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 2365 Northside Drive, Suite 300 San Diego, CA 92108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Penn Credit Corporation** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 916 S. 14th Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Harrisburg, PA 17104 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **Rockford Mercantile Agency** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 2502 S Alpine Rd Rockford, IL 61108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? The Affiliated Group Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 7381 Airport View Drive SW ■ Part 2: Creditors with Nonpriority Unsecured Claims Rochester, MN 55902 Last 4 digits of account number Name and Address On which entry in Part 1 or Part2 did you list the original creditor? **TransUnion** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 555 West Adams Street Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Iracy Allen Hollin		Case number (if know)					
Chicago, IL 60661							
	Last 4 digits of account nu	Last 4 digits of account number					
Name and Address	On which entry in Part 1 o	Part2 did you list the original creditor?					
Weltman, Weinberg & Reis Co.	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
L.P.A 180 N La Salle St Ste 2400 Chicago, IL 60601-2704		■ Part 2: Creditors with Nonpriority Unsecured Claims					
<b>3</b> /	Last 4 digits of account nu	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part2 did you list the original creditor?						
Winnebago County Circuit Court	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
400 W State St 2015 SC 2267 Rockford, IL 61101		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Noomora, in or ion	Last 4 digits of account nu	mber					
Name and Address	On which entry in Part 1 o	Part2 did you list the original creditor?					
Winnebago County Circuit Court	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
400 W State St 2015 SC 3277		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Rockford, IL 61101							
	Last 4 digits of account nu	mber					

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims	0	Obligations and also are also assumed as discuss that are			
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	305,540.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	305,540.00

			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this info	rmation to identify your	case:		
Debtor 1	Tracy Allen Hollin	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	nt Page 30 o	of 55	
Fill in this	information to identify your	case:			
Debtor 1	Tracy Allen Hollin				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Maria de Maria	Last Name		
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numl	her				
(if known)				☐ Check if this is an	
				amended filing	
Official	L Corro 100L				
	I Form 106H				
Sched	lule H: Your Code	ebtors		12/15	
ill it out, a our name	and number the entries in the and case number (if known).	boxes on the left. Attach Answer every question	n the Additional Page t	tion. If more space is needed, copy the Additional Pagto to this page. On the top of any Additional Pages, write	
1. 00	you have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	e as a codeptor.	
■ No □ Yes	S				
	hin the last 8 years, have you a, California, Idaho, Louisiana,			ry? (Community property states and territories include ington, and Wisconsin.)	
	Go to line 3. s. Did your spouse, former spou	se, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only if	that person is a guaran	tor or cosigner. Make	or if your spouse is filing with you. List the person sho e sure you have listed the creditor on Schedule D (Offi 06G). Use Schedule D, Schedule E/F, or Schedule G to	cia
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	<sup>2</sup> Code		Column 2: The creditor to whom you owe the deb Check all schedules that apply:	t
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Codo		

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Fill	in this information to identify your	case:								
Del	otor 1 Tracy Allen	ı Hollin								
	otor 2									
Uni	ted States Bankruptcy Court for th	ne: NORTHERN DISTRI	CT OF ILLINOIS							
	se number nown)		-			□ An		ed filing ent showin	ng postpetition	
0	fficial Form 106l								ollowing date	:
	chedule I: Your Inc	rome				MN	M / DD/ Y	YYY		12/1
sup spo atta	as complete and accurate as posphyling correct information. If youse. If you are separated and you have separate sheet to this form  Describe Employment	u are married and not fili our spouse is not filing w . On the top of any addit	ing jointly, and your ith you, do not inclu	spouse ude infor	is liv mati	ing with on about	you, inc your sp	lude infor ouse. If m	mation about nore space is	ut your s needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>	■ Employed □ Not employed			☐ Employed ☐ Not employed			
	employers.	Occupation	Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	Murphy USA							
	Occupation may include student or homemaker, if it applies.	Employer's address	2505 Gateway ( Belvidere, IL 61							
		How long employed t	here? 5 years	<b>3</b>			_			
Par	t 2: Give Details About Mo	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to	report for	any	line, write	\$0 in the	e space. In	nclude your no	on-filing
If yo	u or your non-filing spouse have n e space, attach a separate sheet t	nore than one employer, c o this form.	ombine the information	on for all	empl	oyers for t	that pers	on on the	lines below. I	f you need
						For Debt	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly	•		2.	\$	3,9	902.62	\$	N/A	-
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	-
4	Calculate gross Income. Add	line 2 + line 3		4	\$	3 90	2 62	\$	N/Δ	

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Debt	or 1	Tracy Allen Hollin		C	Case i	number ( <i>if kn</i>	own)				
						Debtor 1			Debtor filing s	2 or spouse	
	Cop	y line 4 here	4.		\$	3,902	.62	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$	925	.95	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	).	\$		.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	<b>:</b> .	\$	0	.00	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	50		\$		.00	\$		N/A	_
	5e. 5f.	Insurance	5e 5f.		\$_ \$		.17	\$ \$		N/A	_
	5g.	Domestic support obligations Union dues	5g		<sup>Ф</sup> —		0.00	э \$		N/A	_
	5h.	Other deductions. Specify: Uniform	_		<u>\$</u> —			+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	1,122		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* — \$	2,780		\$		N/A	_
8.		all other income regularly received:	•		<b>–</b>	2,700	.00	Ψ		14/	<u> </u>
0.	8a.	Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	١.	\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			ф			Ф.		<b>N1/A</b>	_
	8d.	settlement, and property settlement.  Unemployment compensation	8d 8d		\$_ \$		0.00	\$ \$		N/A	
	8e.	Social Security	8e		<b>\$</b> —		.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	_	\$	0	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g		\$		.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0	.00	+ \$		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0	.00	\$		N/	A
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	•	2,780.00	+ \$		N/A	= \$	2,780.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		2,7 00.00	-   1		14/7	_	2,700.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.  In the contribution of th	dep			, ,		,	Schedul 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies							. 12.	\$	2,780.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							Combi	ined ly income
	_	Voc. Evoloin:									

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Fill	in this informa	tion to identify yo	our case:			•							
Deb	Debtor 1 Tracy Allen Hollin							Check if this is:					
	pouse, if filing)  A supplement showing postpetition chapter 13 expenses as of the following date:												
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS MM /													
	e number nown)												
Of	fficial Fo	rm 106J											
		J: Your I							12/15				
info	ormation. If m		eded, atta	. If two married people a sch another sheet to this n.									
Par 1.	t 1: Descr	ibe Your House	hold										
1.	No. Go to												
			in a separ	ate household?									
	□ No		st file Offic	ial Form 106J-2, <i>Expense</i>	es for Separate Hous	ehold of D	Debto	or 2.					
2.	Do you have	e dependents?	■ No										
	Do not list De and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?				
	Do not state dependents i								□ No □ Yes				
	·								□ No				
									Yes				
									□ No □ Yes				
									□ No				
	_								☐ Yes				
3.	expenses of	enses include f people other tl d your depende	han $_{oldsymbol{\sqcap}}$	No Yes									
exp	imate your ex		our bankrı	uptcy filing date unless					apter 13 case to report f the form and fill in the				
the		n assistance an		government assistance cluded it on <i>Schedule I:</i>				Your expe	enses				
4.		or home owners		ses for your residence.	Include first mortgag	e 4.	\$		650.00				
	If not includ	·	o ground C	101.			₹ .						
							Φ.		0.00				
		estate taxes rty, homeowner's	s or renter	's insurance		4a. 4b.			0.00 0.00				
	•	•		s insurance upkeep expenses		4c.			25.00				
		owner's associat				4d.	\$		0.00				
5.	Additional n	nortgage payme	ents for yo	our residence, such as he	ome equity loans	5.	\$		0.00				

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	Tracy Allen Hollin	Case Hulli	ber (if known)	
Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	100.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	169.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	— 7.	\$	350.00
	dcare and children's education costs	8.	\$	0.00
	ning, laundry, and dry cleaning	9.	·	100.00
	onal care products and services	10.	*	150.00
	ical and dental expenses	11.	·	400.00
	sportation. Include gas, maintenance, bus or train fare.		Ψ	400.00
	ot include car payments.	12.	\$	200.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	itable contributions and religious donations	14.	\$	0.00
5. <b>Insu</b> i	_			0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.		107.00
	Other insurance. Specify:	15d.	·	0.00
	ss. Do not include taxes deducted from your pay or included in lines 4 or 20.		T	0.00
Spec		16.	\$	0.00
	illment or lease payments:		-	3.00
	Car payments for Vehicle 1	17a.	\$	325.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.		0.00
	payments of alimony, maintenance, and support that you did not report as			
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
Othe	r payments you make to support others who do not live with you.		\$	0.00
Spec	ify:	19.		
). Othe	r real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	r: Specify: Miscellaneous, Birthdays, Holidays, Haircuts	21.	· ·	100.00
			<u> </u>	100.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,726.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,726.00
	·			,
	ulate your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,780.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,726.00
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	54.00
	The result is your monthly net income.	230.	Ψ	J-1.00
1 Doy	ou expect an increase or decrease in your expenses within the year after yo	ou file this	form?	
	ou expect an increase of decrease in your expenses within the year after your car loan within the year or do you expect your r			e or decrease because of a
	ication to the terms of your mortgage?	ggo pu	,	
■ N	0.			

page 2

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Fill in this info	rmation to identify your	case:			<b>.</b>
Debtor 1	Tracy Allen Hollin	1			
	First Name	Middle Name	Last Nar	ne	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nar	<u> </u>	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	F OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	<u>m 106Dec</u>				
Declara	tion About a	n Individual	Debtor'	s Schedules	12/15
If two married p	people are filing togethe	r, both are equally respo	onsible for supp	olying correct information.	
V #: - 4	.:. f f:	la hamimuntan ashadula		ahadulaa Maliinu a falaa a	
					statement, concealing property, or 0,000, or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1		in uptoy ouse of	an result in inies up to \$200	5,500, or imprisorment for up to 20
-					
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an atto	rney to help yo	u fill out bankruptcy forms?	?
_ N-					
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, Declaration,
				and Signature (Official	Form 119).
Under pen	alty of perjury, I declare	that I have read the sun	nmary and sche	dules filed with this declar	ation and
that they a	re true and correct.		-		
X /e/ Tr	acy Allen Hollin		Х		
	Allen Hollin			nature of Debtor 2	
	ure of Debtor 1			,	

Date

Date February 19, 2016

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Fill	I in this inform	nation to identify you	case:									
Debtor 1		Tracy Allen Holli										
Do	btor 2	First Name	Middle Name	Last	Name							
	ouse if, filing)	First Name	Middle Name	Last	Name							
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOI	S							
Ca	se number											
(if k	nown)					_	Check if this is an amended filing					
							•					
Of	fficial For	m 107										
			Affairs for Indivi	duals F	ilina for B	ankruptcv	12/15					
						e equally responsible for su						
info	ormation. If me	ore space is needed,	attach a separate sheet to			y additional pages, write y						
nun	nber (if known	). Answer every ques	ition.									
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where Yo	u Lived Be	fore							
1.	What is your	/hat is your current marital status?										
	☐ Married											
	■ Not marr	Not married										
2.	During the la	Ouring the last 3 years, have you lived anywhere other than where you live now?										
	■ No											
	_	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
	Debtor 1 Pri		Dates Debtor 1		Debtor 2 Prior Ad		Dates Debtor 2					
	Debior 1111	or Address.	lived there		Septor 2 i nor Ac	M1033.	lived there					
<b>3.</b> stat						nity property state or territo ico, Texas, Washington and						
	■ No											
	☐ Yes. Mal	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Form	106H).							
Pa	rt 2 Explair	n the Sources of You	r Income									
	Explain	Time Courses of Tou	· moonic									
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.											
	□ No											
	Yes. Fill	in the details.										
			Debtor 1			Debtor 2						
			Sources of income	Gross i	ncome	Sources of income	Gross income					
			Check all that apply.	(before exclusion	deductions and ons)	Check all that apply.	(before deductions and exclusions)					
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips		\$6,002.00	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business			☐ Operating a business						

Official Form 107

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Page 37 of 55 Case number (if known) Debtor 1 Tracy Allen Hollin

				Debtor 1				Debtor 2		
				Sources of Check all the		Gross incom (before deductions)		Sources of ind Check all that a		Gross income (before deductions and exclusions)
		■ Wages, bonuses, ti	- Wagoo, commissione,		16,831.38	☐ Wages, con	nmissions,			
				☐ Operatir	ng a business			☐ Operating a	business	
		dar year be December		■ Wages, bonuses, ti	commissions,	\$4	12,594.17	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operatir	ng a business			☐ Operating a	business	
5.	Include in unemploy gambling  List each	come regard ment, and o and lottery v	dless of whe ther public b vinnings. If y the gross ind	ther that inconcenefit paymer ou are filing a	ne is taxable. Exa tts; pensions; rer joint case and yo	ntal income; inte ou have income	income are a rest; dividen that you rec	alimony; child sup	ed from laws t it only once	uits; royalties; and
				Debtor 1				Debtor 2		
				Sources of Describe be		Gross incom (before deduce exclusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
		dar year be December		Pension/A Distribution		\$	64,764.00			
					e You Filed for					
6.	□ No.	Neither D	ebtor 1 nor	Debtor 2 has	narily consume primarily consumily, or househo	umer debts. Co	nsumer debi	s are defined in 1	1 U.S.C. § 10	01(8) as "incurred by an
			-	-	or bankruptcy, di	lid you pay any c	reditor a tota	of \$6,225* or mo	ore?	
		□ No.	Go to line	7.						
		☐ Yes	paid that c	reditor. Do no	t include paymer	nts for domestic	support oblig			the total amount you and alimony. Also, do
		* Subject				this bankruptcy c rs after that for c		or after the date	of adjustmer	ıt.
	Yes.				primarily consuor bankruptcy, di		reditor a tota	ıl of \$600 or more	?	
		□ No.	Go to line	7.						
Yes List below each creditor include payments for do an attorney for this bank					mestic support o					
	Creditor	's Name an	d Address		Dates of payme	ent Total	amount paid	Amount you still owe	Was this	payment for
	Grant Park Auto Attn: Bankruptcy Dept. 908 Broadway Rockford, IL 61104			Monthly	•	\$325.00	\$6,000.00	☐ Mortgag ☐ Car ☐ Credit ( ☐ Loan R ☐ Supplie	Card	

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Case number (if known) Debtor 1 **Tracy Allen Hollin** Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider Reason for this payment Insider's Name and Address Dates of payment Total amount Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Status of the case Nature of the case Court or agency Case number Capital One Bank USA NA v. Tracy Winnebago County Circuit Contract □ Pending Hollin Court □ On appeal 2015 SC 2267 400 W State St Concluded Rockford, IL 61101 LVNV Funding LLC v. Tracy Hollin Contract Winnebago County Circuit Pending 2015 SC 3277 Court On appeal 400 W State St □ Concluded Rockford, IL 61101 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Yes. Fill in the information below. Creditor Name and Address Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☐ Yes

No

Case 16-80372 Filed 02/19/16 Entered 02/19/16 13:31:44 Desc Main Doc 1 Page 39 of 55 Case number (if known) Document **Tracy Allen Hollin** Debtor 1 Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? 14

	■ No □ Yes. Fill in the details for each gift.	<b></b> ,	, g, g		
	Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift and Address:		Describe the gifts	Dates you gave the gifts	Value
14.	Within 2 years before you filed for banks  ■ No  □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a tution.	otal value of more than	\$600 to any charity
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
13.	disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred	Desci	r since you filed for bankruptcy, did you lose a ribe any insurance coverage for the loss the the amount that insurance has paid. List any insurance claims on line 33 of Schedule A/B:	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfer	Prope s	rty.		
16.	consulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf paing a bankruptcy petition? ers, or credit counseling agencies for services requ		erty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104		\$500.00	1/2016	\$500.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No	ditors		y or transfer any prope	erty to anyone who

☐ Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made

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Debtor 1 Tracy Allen Hollin

<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any proper transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>							•		
		on Who Received Transfer		Description and property transfer		р	escribe any propayments receive		Date transfer was made
	Perso	on's relationship to you				р	aid in exchange		
19.	<ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar dev beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						milar device	of which you are a	
		e of trust		Description and	value of the pr	operty	transferred		Date Transfer was
									made
Par	t 8:	List of Certain Financial Accounts, Ir	nstrun	nents, Safe Deposi	t Boxes, and	Storage	Units		
20.		1 1 year before you filed for bankrupt	cy, we	ere any financial a	counts or ins	trumen	ts held in your n	ame, or for yo	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No							t unions, brokerage	
	□ Y	es. Fill in the details.							
		e of Financial Institution and PSS (Number, Street, City, State and ZIP		t 4 digits of ount number	Type of accomment	ount or	Date according closed, so moved, or transferred	ld,	Last balance before closing or transfer
21.		Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	<b>■</b> N								
		es. Fill in the details.		M/h = alaa b a d aa	1- 10	ess to it? Describe the contents			Da
		e of Financial Institution SSS (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S State and ZIP Code)		Desc	ribe the content	S	Do you still have it?
22.	Have y	you stored property in a storage unit	or pla	ace other than you	r home within	1 year	before you filed	for bankrupto	e <b>y</b>
	■ N								
		es. Fill in the details. e of Storage Facility		Who else has or	had accoss	Dosc	ribe the content	•	Do you still
		ess (Number, Street, City, State and ZIP Code)		to it? Address (Number, State and ZIP Code)		Desc	inde the content	•	have it?
Par	t 9:	Identify Property You Hold or Contro	l for S	Someone Else					
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or he for someone.							or, or hold in trust		
	■ N	o es. Fill in the details.							
		er's Name ess (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, S Code)		Desc	ribe the property	/	Value
Par	t 10:	Give Details About Environmental In	forma	tion					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5 Case 16-80372 Doc 1 Filed 02/19/16 Entered 02/19/16 13:31:44 Desc Main Page 41 of 55 Case number (if known) Document

Debtor 1 **Tracy Allen Hollin** 

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.							
Has	any governmental unit notified you that	you may be liable or potentially liable	une	der or in violation of an environm	ental law?		
	No						
	Yes. Fill in the details.						
		Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice		
Have you notified any governmental unit of any release of hazardous material?							
	No Yes. Fill in the details.						
		Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice		
Hav	e you been a party in any judicial or adm	inistrative proceeding under any envi	ron	mental law? Include settlements	and orders.		
	No Yes. Fill in the details.						
Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
11:	Give Details About Your Business or 0	Connections to Any Business					
Wit	hin 4 years before you filed for bankrupte	cy, did you own a business or have an	ıv of	f the following connections to any	/ business?		
			•	-			
	☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (l	LLP)			
	☐ A partner in a partnership						
☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting	or equity securities of a corporation					
	No. None of the above applies. Go to P	art 12.					
	Yes. Check all that apply above and fill	in the details below for each business	S.				
		Describe the nature of the business		Employer Identification number			
(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed			
Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	No						
	Yes. Fill in the details below.						
Name Address (Number, Street, City, State and ZIP Code)							
	Nad Add Hav	No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Have you notified any governmental unit of a No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Have you been a party in any judicial or adm No Yes. Fill in the details.  Case Title Case Number  11: Give Details About Your Business or Company of the State of State of the State of t	No   Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   A sole proprietor or self-employed in a trade, profession, or other activity,   A member of a limited liability company (LLC) or limited liability partnersh   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business Name Address (Number, Street, City, State and ZIP Code)   Describe the nature of the business Name of accountant or bookkeeper   No   Yes. Fill in the details below.   Name   Date Issued   Date Iss	No   Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Case Title   Case Number   Court or agency   Name   Address (Number, Street, City, State and ZIP Code)   State and ZIP Code)     112	Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State an		

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6 Case 16-80372 Doc 1 Filed 02/19/16 Entered 02/19/16 13:31:44 Desc Main Page 42 of 55
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Debtor 1 Tracy Allen Hollin

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tracy Allen Hollin Signature of Debtor 2 **Tracy Allen Hollin** 

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No ☐ Yes

Signature of Debtor 1

Date February 19, 2016

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:			
Debtor 1	Tracy Allen Hollin				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS		
Officed States Ba	ankrupicy Court for the.	TORTHERIN DIO	TRIOT OF ILLINOIS		
Case number _					
(if known)					Check if this is an
					amended filing
Official Fo	rm 108				
_		n for Indiv	iduale Filina	<b>Under Chapte</b>	r 7
Statemen	it of intentio	ii ioi iiidiv	iduais i iiiig	Onder Chapte	12/15
If you are an indi	ividual filing under cha	ntor 7 vou must fi	Il out this form if:		
_	e claims secured by yo	-	ii out tilis ionii ii.		
_	• •		at averina d		
	sed personal property a is form with the court w			v netition or by the date se	t for the meeting of creditors,
					creditors and lessors you list
on the	form				
If two married pe	eople are filing togethe	r in a joint case, bo	oth are equally responsib	ble for supplying correct in	formation. Both debtors must
sign ar	nd date the form.	•			
Re as complete a	and accurate as nossih	le If more snace is	s needed attach a senar	rate sheet to this form. On t	the top of any additional pages,
	our name and case nur		s necucu, attacii a sepai	ate sheet to this form. On t	ine top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims			
1. For any credit	ors that you listed in Pa	art 1 of Schedule D	: Creditors Who Have C	laims Secured by Property	(Official Form 106D), fill in the
information be			140		
Identify the cr	editor and the property t	hat is collateral	What do you intend to secures a debt?	o do with the property that	Did you claim the property as exempt on Schedule C?
			oodaroo a aostr		as exempt on constant of
Creditor's G	Frant Park Auto		☐ Surrender the prope	rty.	□ No
name:			☐ Retain the property	and redeem it.	
Description of	2006 Ford Fusion	160 000 miles	Retain the property		■ Yes
•	2000 FOIG FUSION	100,000 iiiiles	Reaffirmation Agree		
property securing debt:			☐ Retain the property	and [explain]:	
occurring debt.					_
Part 2: List Yo	our Unexpired Persona	I Property Leases			
For any unexpire	ed personal property le	ase that you listed	in Schedule G: Executo	ry Contracts and Unexpire	d Leases (Official Form 106G), fill
				es that are still in effect; the sume it. 11 U.S.C. § 365(p)(2	e lease period has not yet ended.
Tou may assume	e an unexpired persone	ii property lease ii	ine trustee does not ass	dille it. 11 0.5.0. § 505(p)(2	<del>-).</del>
Describe your u	nexpired personal pro	perty leases			Will the lease be assumed?
Lessor's name:	anad				□ No
Description of lea Property:	aseu				☐ Yes
. ,					163
Lessor's name:					□ No
Description of lea	ased				
Property:					☐ Yes
Laggarie					П.,
Lessor's name:					□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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B8 (Form 8) (12/08)	Page 2
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X /s/ Tracy Allen Hollin	X
Tracy Allen Hollin Signature of Debtor 1	Signature of Debtor 2
Signature of Debitor 1	
Date February 19, 2016	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-80372 Doc 1 Filed 02/19/16 Entered 02/19/16 13:31:44 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Tracy Allen Hollin		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filter rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received			500.00	
	Balance Due		\$	0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mem	bers and associates of a	ny law firm.
1	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				w firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy c	ase, including:	
t	<ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, state.</li> <li>c. Representation of the debtor at the meeting of credit</li> </ul>	atement of affairs and plan which	may be required;	-	uptcy;
C	<ol> <li>Other provisions as needed]         Negotiations with secured creditors to reaffirmation agreements and applications of liens on headers.     </li> </ol>	ions as needed; preparation	emption planning and filing of mot	; preparation and fi ions pursuant to 11	ling of USC
6. I	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.	ee does not include the following ischargeability actions, judi	g service: cial lien avoidanc	es, relief from stay	actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the del	otor(s) in
F	ebruary 19, 2016	/s/ Daniel A. Sprii	nger		
$D_{i}$	ate	Daniel A. Springe			
		Signature of Attorne Springer Law Fir			
		2222 E State St			
		Suite 107 Rockford, IL 6110	04		
		815.312.4725			
		dspringerlaw@gi	mail.com		
		Name of law firm			

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Document

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Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4275

### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 2 17-16

Signature:

Print Name:

Attorney Signature:

Attorney Print:

### **United States Bankruptcy Court** Northern District of Illinois

In re	Tracy Allen Hollin		Case No.	
III IC	Tracy Aller Hollin	Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR MA	ATRIX	
		Number of 0	Creditors:	35
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	ors is true and correct to	the best of my
Date:	February 19, 2016	/s/ Tracy Allen Hollin Tracy Allen Hollin Signature of Debtor		

Barclay's Bank Delaware Attn: Bankruptcy Dept. PO Box 8803 Wilmington, DE 19899

Best Care Emergency Physicians 18167 US HWY 19 N, Suite 285 Clearwater, FL 33764

Blitt & Gaines PC 661 Glenn Ave Wheeling, IL 60090

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

Cavalry Portfolio Services 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595

Chase Bank USA Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850

Commonwealth Financial Attn: Bankruptcy Dept. 245 Main St. Scranton, PA 18519

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Credit First NA PO Box 81315 Cleveland, OH 44181

Credit One Bank NA Attn: Bankruptcy Dept. PO Box 98872 Las Vegas, NV 89193 Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

Grant Park Auto
Attn: Bankruptcy Dept.
908 Broadway
Rockford, IL 61104

HSBC Bank Attn: Bankruptcy Dept. PO Box 9 Buffalo, NY 14240

LVNV Funding Attn: Bankruptcy Dept. PO Box 10497 Greenville, SC 29603

Midland Funding, LLC Attn: Bankruptcy Dept. 2365 Northside Drive, Suite 300 San Diego, CA 92108

Osceola County EMS 2586 Partin Settlement Road Kissimmee, FL 34744

Osceola Regional Medical Center 700 West Oak Street Kissimmee, FL 34741

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381 Penn Credit Corporation 916 S. 14th Street Harrisburg, PA 17104

Physicians Immediate Care PO Box 8798 Carol Stream, IL 60197

Rockford Health Physicians Attn: Bankruptcy Dept. 2300 N Rockton Ave. Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

SYNCB/JC Penney Attn: Bankruptcy Dept. PO Box 965007 Orlando, FL 32896

Syncb/Paypalsmartconn PO Box 965005 Orlando, FL 32896

Syncb/Sams Club PO Box 965005 Orlando, FL 32896

SYNCB/Wal-Mart Attn: Bankruptcy Dept. PO Box 965024 Orlando, FL 32896

The Affiliated Group 7381 Airport View Drive SW Rochester, MN 55902

TransUnion 555 West Adams Street Chicago, IL 60661 Webbnk/FSTR Attn: Bankruptcy Dept. 6250 Ridgewood Road Saint Cloud, MN 56303

Weltman, Weinberg & Reis Co. L.P.A 180 N La Salle St Ste 2400 Chicago, IL 60601-2704

Winnebago County Circuit Court 400 W State St 2015 SC 2267 Rockford, IL 61101

Winnebago County Circuit Court 400 W State St 2015 SC 3277 Rockford, IL 61101

World Finance Corp Att: Bankruptcy Dept. 5301 E State St. STE 109 Rockford, IL 61108